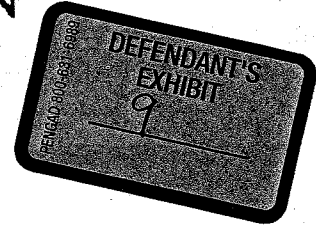


CITY OF DOTHAN

IN-HOUSE APPLICATION

PROMOTIONS/DEMOTIONS/TRANSFER

EOE M/F/D


 Cl
7-1

TO THE EMPLOYEE: WE APPRECIATE YOUR INTEREST IN IN-HOUSE OPPORTUNITIES, AND ASSURE YOU WE ARE SINCERELY INTERESTED IN YOUR QUALIFICATIONS. A CLEAR UNDERSTANDING OF YOUR EXPERIENCE, WORK HISTORY AND EDUCATION (WHERE EDUCATION APPLIES) IS NECESSARY TO EVALUATE YOUR QUALIFICATION FOR THE POSITION FOR WHICH YOU ARE APPLYING. THEREFORE, IT IS EXTREMELY IMPORTANT THAT YOU COMPLETE THE APPLICATION FORM THOROUGHLY, PROVIDING ALL INFORMATION REQUESTED. YOU MAY ATTACH ADDITIONAL INFORMATION TO THIS APPLICATION IF NECESSARY. APPLICATIONS WHICH ARE INCOMPLETE WILL NOT BE CONSIDERED.

POSITION APPLYING FOR: Secretary 033-95-P1

Brackin Mary E 416-17-1297
LAST NAME FIRST MI SOCIAL SECURITY #

107 Concord Cir 794-2640
PRESENT ADDRESS: STREET#/ROUTE-BOX# HOME TELEPHONE #

Dothan AL 36301 793-0284
CITY STATE ZIP WORK TELEPHONE #

1. ARE YOU RELATED TO A CURRENT DEPARTMENT HEAD? YES ☐ NO ☒ IF YES, LIST NAME(S), RELATIONSHIP & DEPARTMENT: _____

2. DO YOU HAVE A VALID OPERATOR OR COMMERCIAL DRIVER'S LICENSE? YES ☒ NO ☐

OPERATOR DRIVER'S LICENSE # 5144702 STATE AL

COMMERCIAL DRIVER'S LICENSE (CDL) CLASS — ENDORSEMENTS —

EXPIRATION DATE 6-25-99 RESTRICTIONS None

IF THE POSITION FOR WHICH YOU ARE APPLYING REQUIRES POSSESSION OF A VALID OPERATOR OR CDL LICENSE, PRESENT YOUR LICENSE ALONG WITH YOUR APPLICATION.

3. DO YOU HAVE ANY PHYSICAL CONDITIONS WHICH COULD LIMIT YOUR ABILITY TO PERFORM THE

JOB APPLIED FOR? YES ☐ NO ☒

IF YES, EXPLAIN _____

R E C O R D O F E D U C A T I O N

DID YOU GRADUATE FROM HIGH SCHOOL? (IF YOU HAVE A GED HIGH SCHOOL EQUIVALENCY ANSWER YES). YES ☒ NO ☐

NAME AND ADDRESS OF SCHOOL WHERE GRADUATED OR RECEIVED GED: _____

Rehobeth High School

5. IF YOU DID NOT GRADUATE FROM HIGH SCHOOL, INDICATE HIGHEST GRADE COMPLETED: _____

NAME AND ADDRESS OF SCHOOL: _____

6. OTHER JOB RELATED EDUCATION (COLLEGE COURSES, SEMINARS, WORKSHOPS, ETC)

NAME OF COLLEGE, SEMINARS, TRAINING, ETC. (CITY, STATE, ZIP CODE)	INDICATE MAJOR, SEMINAR CONTENT, ETC.	#OF CREDITS/HRS. COMPLETED. SEM &/OR QUARTER.	DEGREE/CERTIFICATE ETC.
1) <u>Riley College</u>	<u>Computer Clerical</u>	<u>6-month Program</u>	<u>Diploma</u>
2) <u>Municipal Court Clerk & Magistrates Certification TRAIN</u>	<u>Certification TRAINING.</u>		<u>Certificate</u>
3) <u>Workshop (Mobile)</u>	<u>4th offense DUI BAIL Bonding Law</u>		

W O R K H I S T O R Y
LIST PRESENT CITY OF DOTHAN JOB FIRST

1) DATES OF EMPLOYMENT (MONTH/YEAR) FROM <u>5-1-92</u> TO: PRESENT	EXACT TITLE OR POSITION <u>MAGISTRATE</u>	SALARY OR EARNINGS <u>\$9.04/Hr</u>
NAME OF EMPLOYER <u>City of Dothan</u>	NAME OF YOUR SUPERVISOR <u>Gayle Kellenberger</u>	

REASON FOR WANTING PROMOTION OR DEMOTION OR TRANSFER

Stable Working Hours

DESCRIPTION OF DUTIES AND RESPONSIBILITIES INCLUDING NUMBER AND TYPE OF EMPLOYEES SUPERVISED: Responsible for determining probable cause & issuance of Misdemeanor warrants. Swearing officers to traffic tickets & complaints. Entering court cases into computer & process of paperwork. Assisting Municipal Judge in the Courtroom. Processing youthful offender cases. Ability to make decisions with little or no supervision. Assist the public tactfully & courteously with their concerns & questions. Type notices of Appeal from City Court to Circuit Court. Reading & understanding of OFFENSE - ARREST Reports. Involved with the training of other Magistrates, per, reads & routes incoming mail.

WORK HISTORY (CONTINUED)

2) DATES OF EMPLOYMENT (MONTH/YEAR)	EXACT TITLE OR POSITION	SALARY OR EARNINGS
FROM: Dec 1990 TO: Feb 1992	OFFICE MANAGER/RECEPTIONIST	\$6.60/HR
NAME OF EMPLOYER Automated Control Systems	ADDRESS OF EMPLOYER 122 Woodburn Drive	
NAME OF YOUR SUPERVISOR Gary McGowan	REASON FOR LEAVING Laid-off	
DESCRIPTION OF DUTIES AND RESPONSIBILITIES INCLUDING NUMBER AND TYPE OF EMPLOYEES SUPERVISED: Answer telephone; Type letters from rough draft copy; weekly + semi-monthly payroll; Payroll Taxes; Sales + Use tax; Accounts Payable + Receivable; Bank Deposits; Invoicing; Purchase Orders; Make decisions on purchases; Record Vacation + Holiday time on Personal Employee Time Sheet; Maintain Job Cost + Cost of Equipment Sold; Close month-end Accounting Procedures + Filing		
3) DATES OF EMPLOYMENT (MONTH/YEAR)	EXACT TITLE OR POSITION	SALARY OR EARNINGS
FROM: 3-90 TO: 11-90	Accounting Clerk	\$7.25/HR
NAME OF EMPLOYER Whalley-White	ADDRESS OF EMPLOYER 300 Murray Road	
NAME OF YOUR SUPERVISOR Melissa Key	REASON FOR LEAVING Company went out of business	
DESCRIPTION OF DUTIES AND RESPONSIBILITIES INCLUDING NUMBER AND TYPE OF EMPLOYEES SUPERVISED: Computerized Accounts Receivable + Accounts Payable; Filing; Answer telephone; Reconcile BANK STATEMENTS - Payroll + Accounts Payable; Deposits + Close month-end Accounting Procedures		
4) DATES OF EMPLOYMENT (MONTH/YEAR)	EXACT TITLE OR POSITION	SALARY OR EARNINGS
FROM: 11-88 TO: 10-89	Accounting Assistant	\$8.75/HR
NAME OF EMPLOYER Riley College	ADDRESS OF EMPLOYER 4129 Ross Clark Cir	
NAME OF YOUR SUPERVISOR Peggy Rice	REASON FOR LEAVING Lack of work (laid-off)	
DESCRIPTION OF DUTIES AND RESPONSIBILITIES INCLUDING NUMBER AND TYPE OF EMPLOYEES SUPERVISED: Running daily back-up on computers; daily bank deposits; coding Accounts Receivable; Setting up tuition for Accounts Receivable on each student; Close month-end Accounting Procedures + Fiscal Year end; Prepare Purchase Orders		

7. CLERICAL APPLICANTS: PLEASE COMPLETE THE FOLLOWING

	TRAINING-YEARS	EXPERIENCE-YEARS	WORDS-MINUTE	EXPERIENCE-YEARS
BOOKKEEPING	2	7	TYPING 60	12
OFFICE MACHINES	KINDS 10-key calculator Fax machine Telephone + copier		WORD PROCESSING PROGRAMS: DISPLAY WRITE Lotus 1-2-3 Word Perfect PC FILE	

HD2\M\PF.148\10-90

 DOTHAN/Martin & Brackin 0863
 Confidential Subject to Protective
 Order

8. LABOR TRADES & CRAFT APPLICANTS: PLEASE COMPLETE THE FOLLOWING:

EQUIPMENT/MACHINES
List:TRAINING? YES ___ NO ___
If yes, give # of months/years; and list
if training was vocational or on-the-job.EXPERIENCE
(Number of months/years you
have operated each piece of
equipment you've listed)

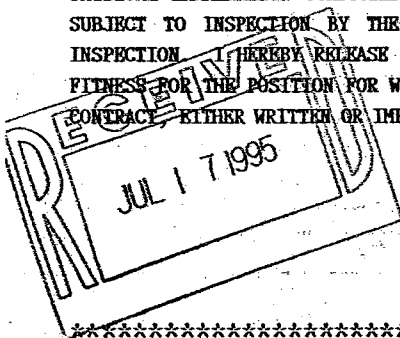
TOOLS (List kinds):

9. USE THIS SPACE TO LIST AWARDS, HONORS, OTHER SKILLS, QUALIFICATIONS, OR COMMENTS WHICH WOULD ASSIST US IN EVALUATING YOUR APPLICATION.

Since working as a Magistrate in THE Dothan Police Dept. I deal with many people every day. I feel my experience with my current position will be an Asset for this position.

PLEASE READ CAREFULLY
APPLICANT CERTIFICATION AND AGREEMENT

I HEREBY CERTIFY THAT ALL STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM FURTHER AWARE THAT WILLFULLY WITHHOLDING INFORMATION OR MAKING FALSE STATEMENTS ON THIS APPLICATION WILL BE A BASIS FOR DENIAL OF A POSITION, AND SHOULD SUCH WILLFUL WITHHOLDING OR FALSE STATEMENT BECOME EVIDENT AFTER EMPLOYMENT, SUCH EVIDENCE WILL CONSTITUTE SUFFICIENT GROUNDS FOR DISMISSAL FROM EMPLOYMENT WITH THE CITY OF DOTHAN. I UNDERSTAND ALL APPOINTMENTS ARE PROBATIONARY FOR A SIX MONTH PERIOD, EXCEPT THOSE APPOINTMENTS TO THE POLICE OR FIRE DEPARTMENTS WHICH SHALL BE FOR A ONE YEAR PERIOD DURING WHICH TIME I MUST DEMONSTRATE MY FITNESS FOR AND ABILITY TO CONTINUE MY EMPLOYMENT WITH THE CITY. IN ADDITION I UNDERSTAND THAT THE CITY OF DOTHAN SHALL RESERVE THE RIGHT TO REQUIRE A PHYSICAL EXAMINATION AT CITY EXPENSE AT ANY TIME TO DETERMINE MY CONTINUED ABILITY TO PERFORM THE WORK REQUIRED IN THE POSITION FOR WHICH I AM EMPLOYED. I AGREE THAT THIS APPLICATION AND ALL PAPERS IN CONNECTION WITH IT AS WELL AS RESULTS OF ANY PHYSICAL EXAMINATION CONDUCTED IN RELATION TO MY EMPLOYMENT SHALL BE CONFIDENTIAL RECORDS OF THE PERSONNEL DEPARTMENT SUBJECT TO INSPECTION BY THE APPOINTING AUTHORITY, AS PROVIDED IN THE RULES AND REGULATIONS, AND TO MY PERSONAL INSPECTION. I HEREBY RELEASE TO THE PERSONNEL DEPARTMENT ANY AND ALL INFORMATION AND/OR RECORDS NEEDED TO DETERMINE MY FITNESS FOR THE POSITION FOR WHICH I AM APPLYING. I UNDERSTAND THAT THIS APPLICATION DOES NOT CONSTITUTE AN OFFER OR A CONTRACT, EITHER WRITTEN OR IMPLIED. I FULLY UNDERSTAND AND AGREE TO THESE CONDITIONS.



Mary Beth Brack

USUAL SIGNATURE OF APPLICANT

July 17, 1995

DATE

SECRETARY

SUPPLEMENTAL APPLICATION

This form will be used to screen for the basic qualifications listed on the job description (refer to the job description inside your employment application; or attached to your promotional application). You are required to answer all questions as accurately as possible. The term "Explanation" requires that you provide descriptive examples and/or education to support a YES answer to a question. When you use working experience to answer any questions on this form, be sure to list the employer on your employment or promotional application. If you run out of space please attach additional sheets of paper to your application and/or this supplemental application.

1. Have you graduated from high school or equivalent? Yes X No _____
2. List all courses you have taken, in business practices, stenography, typing, etc.:

Typing; OFFICE Procedures + Practices; Filing; Accounting
Procedures; Dictaphone; 10-key Calculator; copy Machine;
Tax Machine; Telephone Procedures

3. Do you have at least one year of responsible experience in clerical and stenographic work?

Yes X No _____. If yes, explain:

I have extensive experience in clerical duties.
(see above + past work experience)

I took a course in dictaphone in High School
+ used it somewhat in past work related jobs.

I certify that the above information is accurate to the best of my knowledge and belief. I understand that misrepresentation or omission of facts will be cause for cancellation of consideration for employment or dismissal if promoted.

May Beth Brack
 Signature of Applicant

July 17, 1995
 Date